



General

Title

Oncology: percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy in which pain intensity is quantified.

Source(s)

eCQI Resource Center. Oncology: medical and radiation - pain intensity quantified. [internet]. Washington (DC): U.S. Department of Health and Human Services; 2017 Jun 9 [4].

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Process

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy in which pain intensity is quantified.

Rationale

Inadequate cancer pain management is widely prevalent, harmful to the patient and costly.

Clinical Recommendation Statement

All patients must be screened for pain at each contact.

Pain intensity must be quantified and quality must be characterized by the patient (whenever possible based on patient communication capacity).

Comprehensive pain assessment must be performed if new or worsening pain is present and

regularly performed for persisting pain.

If necessary, get additional information for family/ caregiver regarding pain and impact of function (National Comprehensive Cancer Network [NCCN], 2015).

Various methods and tools exist to assess pain severity. Intensity of pain should be quantified using a numerical rating scale (i.e., 0 to 10), visual analog scale, categorical scale, or pictorial scale (e.g., The Faces Pain Rating Scale) (NCCN, 2015).

Evidence for Rationale

eCQI Resource Center. Oncology: medical and radiation - pain intensity quantified. [internet]. Washington (DC): U.S. Department of Health and Human Services; 2017 Jun 9 [4].

National Comprehensive Cancer Network (NCCN). Clinical practice guidelines in oncology: adult cancer pain. Version 2. Fort Washington (PA): National Comprehensive Cancer Network (NCCN); 2015.

Primary Health Components

Cancer; chemotherapy; radiation therapy; pain intensity

Denominator Description

All patient visits, regardless of age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy (see the related "Denominator Inclusions/Exclusions" field)

Numerator Description

Patient visits in which pain intensity is quantified (see the related "Numerator Inclusions/Exclusions" field)

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

The American Medical Association (AMA)-convened Physician Consortium for Performance Improvement (PCPI) collaborated on a measure testing project in 2011 with American Society of Clinical Oncology (ASCO) and American Society for Radiation Oncology (ASTRO), to ensure the *Oncology: Medical and Radiation – Pain Intensity Quantified* measure was reliable and evaluated for accuracy of the measure numerator, denominator and exception case identification. The testing project was conducted utilizing chart data. Inter-rater reliability was tested. Five sites participated in the testing of the measures. Two

sites were in urban settings, two sites were in suburban settings, and one had multiple practice sites in urban, rural and suburban settings. Site A was a hospital-based practice with 21 physicians. Site B was a physician-owned private practice with four physicians. Site C was a physician-owned private practice with 41 physicians. Site D was an academic practice with nine physicians. Site E was an academic practice with 14 physicians.

Reliability Testing

The purpose of reliability testing was to evaluate whether the measure definitions and specifications, as prepared by the PCPI, yield stable, consistent measures. Data abstracted from chart records were used to calculate inter-rater reliability for the measures.

Reliability Testing Results

Oncology: Medical and Radiation - Pain Intensity Quantified

There were 862 observations from five sites used for the denominator analysis. The kappa statistic value was found to be non-calculable resulting from the inability to divide-by-zero in the statistic formula when only one response was used.

Of the 862 observations that were initially selected, 862 observations met the criteria for inclusion in the numerator analysis. The kappa statistic value of 0.990 demonstrates almost perfect agreement between reviewers.

Reliability: N, % Agreement, Kappa (95% Confidence Interval)

Denominator: 862, 100.00%, (0.990 (0.970-1.000))

Numerator: 862, 99.99%, Non-Calculable (Non-Calculable, Non-Calculable)*

Exceptions: Not applicable, Not applicable, Not applicable

This measure demonstrates perfect reliability, as shown in results from the above analysis.

*Cannot calculate kappa statistics when only one response (Yes/Yes) was used, as this causes a divide-by-zero error in the statistic formula.

Evidence for Extent of Measure Testing

American Medical Association-convened Physician Consortium for Performance Improvement® (PCPI®), American Society for Therapeutic Radiology and Oncology (ASTRO), American Society of Clinical Oncology (ASCO). Oncology performance measurement sets. Chicago (IL): American Medical Association (AMA); 2015 Sep. 36 p. [5 references]

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

measurement setting

Ambulatory/Office-based Care

Ambulatory Procedure/Imaging Center

Hospital Outpatient

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Individual Clinicians or Public Health Professionals

Statement of Acceptable Minimum Sample Size

Unspecified

Target Population Age

All patients, regardless of age

Target Population Gender

Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Getting Better

Living with Illness

IOM Domain

Effectiveness

Data Collection for the Measure

Case Finding Period

The 12-month reporting period (January 1 through December 31)

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Clinical Condition

Encounter

Therapeutic Intervention

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

All patient visits, regardless of age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy

Note: Refer to the original measure documentation for data criteria and associated value sets.

Exclusions

None

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Patient visits in which pain intensity is quantified

Note:

This measure is an episode-of-care measure; the level of analysis for this measure is every visit for patients with a diagnosis of cancer who are also receiving chemotherapy or radiation therapy during the measurement period. For patients receiving radiation therapy, pain intensity should be quantified at each radiation treatment management encounter. For patients receiving chemotherapy, pain intensity should be quantified at each face-to-face encounter with the physician while the patient is receiving treatment. For purposes of calculating this measure, eligible encounters for patients receiving chemotherapy will include those encounters where the patient has been administered chemotherapy within 30 days prior to the encounter and also been

administered chemotherapy within 30 days after the date of the encounter. For example, at every visit for patients with a diagnosis of cancer who are also receiving chemotherapy or radiation therapy, the patient should have pain intensity quantified. Pain intensity should be quantified using a standard instrument, such as a 0 to 10 numeric rating scale, visual analog scale, a categorical scale, or the pictorial scale. Examples include the Faces Pain Rating Scale and the Brief Pain Inventory (BPI). Refer to the original measure documentation for data criteria and associated value sets.

Exclusions

None

Numerator Search Strategy

Fixed time period or point in time

Data Source

Electronic health/medical record

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Identifying Information

Original Title

Oncology: medical and radiation - pain intensity quantified.

Measure Collection Name

AMA/PCPI Oncology Performance Measurement Set

Submitter

PCPI Foundation - Clinical Specialty Collaboration

Developer

American Medical Association - Medical Specialty Society

American Society for Radiation Oncology - Medical Specialty Society

American Society of Clinical Oncology - Medical Specialty Society

Funding Source(s)

Unspecified

Composition of the Group that Developed the Measure

Unspecified

Financial Disclosures/Other Potential Conflicts of Interest

Conflicts, if any, are disclosed in accordance with the Physician Consortium for Performance Improvement® conflict of interest policy.

Endorser

National Quality Forum - None

NQF Number

not defined yet

Date of Endorsement

2017 Mar 28

Core Quality Measures

Medical Oncology

Measure Initiative(s)

Physician Quality Reporting System

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2017 Jun

Measure Maintenance

Annual

Date of Next Anticipated Revision

Unspecified

Measure Status

This is the current release of the measure.

This measure updates a previous version: American Medical Association-convened Physician Consortium for Performance Improvement® (PCPI®), American Society for Therapeutic Radiology and Oncology (ASTRO), American Society of Clinical Oncology (ASCO). Oncology performance measurement sets. Chicago (IL): American Medical Association (AMA); 2015 Sep. 36 p. [5 references].

Measure Availability

Source available from the eCQI Resource Center Web site	. Additional informatio
available from the PCPI Web site	

For more information, contact the PCPI at 330 N. Wabash Avenue Suite 39300, Chicago, IL 60611; Phone: 312-757-7274; E-mail: PCPImeasures@thepcpi.org.

NQMC Status

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This NQMC summary was updated again by ECRI Institute on May 11, 2017. The information was not verified by the measure developer.

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For more information, contact the PCPI at 330 N. Wabash Avenue Suite 39300, Chicago, IL 60611; Phone: 312-757-7274; E-mail: PCPImeasures@thepcpi.org.

Production

Source(s)

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